

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000062594

FILED
Feb 26, 2011
Secretary of State

Entity Name: TOTAL RECOVERY ENTERPRISE, INC.

Current Principal Place of Business:

5475 NW ST JAMES DR., #205
PORT ST LUCIE, FL 34983

New Principal Place of Business:

5475 NW ST JAMES DR. #205
PORT ST LUCIE, FL 34983

Current Mailing Address:

5475 NW ST JAMES DR., #205
PORT ST LUCIE, FL 34983

New Mailing Address:

FEI Number: 80-0632805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRINCE, CONNIE
5475 NW ST JAMES DR., #205
PORT ST LUCIE, FL 34983 US

Name and Address of New Registered Agent:

PRINCE, CONNIE
5475 NW ST JAMES DR. #205
PORT ST LUCIE, FL 34983 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

02/26/2011

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PRINCE, CONNIE
Address: 5475 NW ST JAMES DR. #205
City-St-Zip: PORT ST LUCIE, FL 34983

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CONNIE PRINCE

P

02/26/2011

Electronic Signature of Signing Officer or Director

Date